



This is the Notice of Intent for Stormwater Discharges Associated with Industrial Activity under the State Pollutant Discharge Elimination System (SPDES) Multi-Sector General Permit GP-0-17-004.

SUBMISSIONNUMBER REVISIONNUMBER

31W-GZR5-4F78 1

SECTION 1

Owner/Operator Information

Federal Tax ID # 52-2020407

Enter the name of the legally responsible entity and the address of the executive office.

O/O Name

WEITSMAN SHREDDING, LLC

O/O Street Address

1 RECYCLE DRIVE

O/O City

OWEGO

Contact Information

Enter the name and contact information for the individual responsible for communicating with DEC regarding the implementation of the MSGP on behalf of the Owner/Operator

Contact First Name Contact Last Name

ELZIE WATSON

Contact Phone

(607) 687-7777

Contact Email

EWATSON@UPSTATESHREDDING.COM

OWEGO

Billing State

NY

Facility Information		
Enter the complete street address of the phy	ysical location of the facility.	
Facility Name WEITSMAN SHREDDING		
Facility Street Address 1 RECYCLE DRIVE		
Facility City OWEGO		
Facility State	Facility Zip	
NY	13827	
Provide the geographic coordinates in decin Interactive Map on the DEC's website can b Go to: www.dec.ny.gov/imsmaps/stormwate 42.141283,-76.27190100000001 Latitude, Longitude	•	acility. The NYSDEC Stormwater
Billing Information		
Yes		
Billing First Name WEITSMAN SHREDDING, LLC		Billing Last Name
Billing Street Address 15 WEST MAIN STREET, P.O. BOX 420		
Billing City		

Billing Zip

13827

SECTION 2

1. Does your facility meet all the eligibility requirements listed in Part I.B of the SPDES Multi-Sector General Permit to Yes (Continue with this gain coverage under this general permit? If No, contact the Department to discuss next steps. If Yes, go to question 2(a). 2(a). Has a Stormwater Pollution Prevention Plan (SWPPP) been prepared for this facility in Yes (Continue with 2b) accordance with the requirements of the SPDES Multi-Sector General Permit GP-0-17-004? If No, you are not eligible for permit coverage. 2(b). How will you make your SWPPP available to the public? SWPPP at Facility Yes SWPPP URL SWPPP Street Address SWPPP City SWPPP State SWPPP Zip 3. Does your facility conduct any activities listed in Part I.C of the SPDES Multi-Sector General Permit which would No (Continue) make your facility ineligible for coverage under this general permit? If Yes, contact the Department to discuss next steps. If No, go to question 4. 4. Provide the name of the nearest surface waterbody into which site runoff will discharge. If more than one, list all that apply. **OWEGO CREEK** 5(a). Has the surface waterbody in question 4 been identified as an impaired waterbody as defined in MSGP 0-17 No (Skip to Question 6a) To determine if the waterbody in Question 4 is impaired use the following links available on the Department's public MSGP Toolbox with Map of Impaired http://www.dec.ny.gov/chemical/62803.html http://www.dec.ny.gov/chemical/31290.html Impaired Waters 5(b). Is the pollutant(s) causing the impairment a pollutant of concern included in the benchmarks and/or effluent limitations to which the facility is subject to in Part VII of the SPDES Multi-Sector General Permit? A list of applicable pollutant(s) of concern for the SPDES Multi-Sector General Permit can be found in Appendix G of the 5(c). Does your SWPPP include measures to address the pollutant(s) of concern as required by Part III.D.2 of the SPDES Multi-Sector General Permit? If No, contact the Department to discuss next steps. 6(a). Does site runoff enter a Municipal Separate Storm Sewer System (MS4) including roadside drains, swales, ditches, No (Skip to Question 7a) culverts, etc.? If No, go to question 7(a). 6(b). If Yes, enter the name of the municipality/entity that owns the Municipal Separate Storm Sewer System. 7(a). Has this facility been assigned a SPDES MSGP ID under previous versions of the MSGP? Yes If No, go to question 8. 7(b). If Yes, Provide the ID if known (Note: All SPDES MSGP IDs begin with NYR00) The facility's existing ID is: NYR00D022

SECTION 3

8. Does this facility have coal piles that are exposed to precipitation?		
9. Does this facility have salt piles that are exposed to precipitation?	No	
10. Does this facility discharge stormwater from secondary containment areas for liquid bulk storage or transfer	Yes	
11. SECTOR S - Is this facility an airport that uses more than 100,000 gallons of glycol-based deicing/anti-icing chemicals and/or 100 tons or more of urea on an average annual basis?	No	
12. Is a Representative Outfall Waiver being claimed in accordance with Part IV.G?	No	

(If Yes, please submit the Representative Outfall waiver form with the NOI)

13. For each stormwater discharge associated with industrial activity at your facility, identify the outfall number (e.g., 001, 002, etc.); the four digit Standard Industrial Classification (SIC) codes, the Sector Code, the Sector N Subsector, or 2-letter Industrial Activity Codes that best represent the principal products or services rendered by the facility for that drainage area; and the Benchmark (B) and/or Compliance (C) monitoring required; and the acreage of industrial activity exposed to stormwater for each outfall (round to nearest tenth of an acre):

Industrial Activities (SIC or 2-letter Codes)

Outfall Primary Number SIC Sec 001 5093 N		Secondary SIC Sector		iary IC Sector	Monitoring Required	Acreage 12
	TOR C SECTOR D No No	SECTOR E SE	CTOR J SECTOR L	SECTOR O No	<u>SECTOR S</u> No	
Outfall Primary Number SIC Sec 002 5093 N		Secondary SIC Sector		<u>iiary</u> I <u>C Sector</u>	Monitoring Required	Acreage 2
	TOR C SECTOR D No No	SECTOR E SE	CTOR J SECTOR L	SECTOR O No	SECTOR S No	